PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria. Virginia 22313-145

Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmising the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and posification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (3) specifying a two correspondence address, and/or (6) indicating a separate "FEE ADDRESS" for maintenance fee anotifications.

maintenance fec notification	ons.	, ., .,	(a) specifying a new conte				
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittat. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mus have its own certificate of mailing or transmission.			
22908 . 7	590 11/21	/2007	hav	e ils own certificate	e of mailing or	transmission.	
BANNER & WI TEN SOUTH WA SUITE 3000	I h Sta add tran	Certificate of Malling or Transmission I hereby certify that this Fee(c) Transmittal is being deposited with the Unite. States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Ston ISSUE File address above, or being facsimitationsmitted to the USPTO (571) 273-2885, on the date indicated below.					
CHICAGO, IL 60606				(Depositor's name)			
							(Signature)
			-				(Date)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO. CONFIRMATION NO.		
10/676,318	8 10/01/2003		David Salvadori		6119.00010		6511
TITLE OF INVENTION: ORDER RISK MANAGEMENT SYSTEM							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	JE FEE TOTAL FEE(S) DUE		DATE DUE
nonprovisional	МО	\$1440	\$300	\$0		\$1740	02/21/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS]			
COLBERT, ELLA		3694	705-037000	-			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys I Banner & Witcoff, Ltd.				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or ty	pe)			
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGN	EE	(B) RESIDENCE: (CITY and STATE OR COUNTRY)					
Chicago Mercantile Exchange, Inc.			Chicago, IL				
Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🖾 Corporation or other private group entity 🔘 Government							
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
∑ Issue Fee			A check is enclosed.				
 ☑ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies 			☐ Payment by credit card. Form PTO-2038 is attached. ☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19_0.0733 (enclose an extra copy of this form).				
5. Change in Entity Status	(from status indicated	above)	,,		13-07-33	(chelose un	caus copy of this formy.
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (firequired) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the full red States Party and States.							
NOTE: The Issue Fee and P interest as shown by the rec	ublication Fee (if requ ords of the United Stat	ired) will not be accepte es Patent and Trademark	d from anyone other than t Office.	he applicant; a regis	stered attorney	or agent; or the	assignee or other party in
Authorized Signature Clouds . Mall Date December 10, 2007							
Typed or printed name _		Registration No. 43,805					
This collection of informatic an application, Confidential submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virg Alexandria, Virginia 22313-	on is required by 37 CF ity is governed by 35 I oplication form to the ror reducing this burd inia 22313-1450. DO 1450.	R 1.311. The informatic J.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to th NOT SEND FEES OR (on is required to obtain or a 1.14. This collection is est depending upon the indive e Chief Information Office COMPLETED FORMS TO	etain a benefit by the imated to take 12 m ridual case. Any con- er, U.S. Patent and D THIS ADDRESS.	he public whic ninutes to com mments on the Trademark Off SEND TO: C	h is to file (and l aplete, including a amount of time fice, U.S. Depar Commissioner fo	by the USPTO to process) gathering, preparing, and you require to complete tment of Commerce, P.O. r Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.